UNITED STATES DISTRICT COURT

for the Western District of North Carolina

THE CINCINNATI INSURANCE COMPANY Plaintiff, v.))))	Civil Action No.: 3:15-CV-139
PARADISE HOME IMPROVEMENT, LLC, and SHARON WATSON, individually and as a class representative Defendants.)))	

AMENDED SUMMONS IN A CIVIL ACTION

To: (Defendant's name and address) SHARON WATSON 469 Pop Davis Road Taylorsville, NC 28681

A lawsuit has been filed against you.

Within 21 days after service of this summons on you (not counting the day you received it) – or 60 days if you are the United States or a United States agency, or an officer or employee of the United States described in Fed. R. Civ. P. 12 (a)(2) or (3) – you must serve on the plaintiff an answer to the attached complaint or a motion under Rule 12 of the Federal Rules of Civil Procedure. The answer or motion must be served on the plaintiff or plaintiff's attorney, whose name and address are:

SUSAN K. BURKHART CRANFILL SUMNER & HARTZOG, LLP P.O. BOX 27808 RALEIGH, NC 27611-7808 ATTORNEY FOR PLAINTIFF

If you fail to respond, judgment by default may be entered against you for the relief demanded in the complaint. You also must file your answer or motion with the court.



Date 5/5/2015

Frank G. Johns, Clerk

United States District Court

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Civil Action No.

PROOF OF SERVICE

(This section should not be filed with the court unless required by Fed. R. Civ. P. 4(1))

	s summons for (name of individual and title, if any)	naron Watson	
was received	by me on (date)		
	I personally served the summons on the individual at (place)		
		on (date)	; or
X	I left the summons at the individual's residence or usual pla		•
	on (date) 5'13'11, and mailed a copy to the		
	I served the summons on (name of individual)		, who is
	designated by law to accept service of process on behalf of	(name of organization)	
		on (date)	; or
	I returned the summons unexecuted because		; or
	Other (specify):		
	Unless the summons was issued on behalf of the United Statendered to the witness fees for one day's attendance, and the		
My fees are S	for travel and \$	for services, for a	a total of \$ 0.00
I de	clare under penalty of perjury that this information is true.		
Date:	5-13-15	JDR Sauge	<u>e</u>
			Shappe-Lt
		Printed name and titl	e ———
		91 Commense	ne PARK Ar.
Additional in	formation regarding attempted service, etc:	Server's address	